



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1136684

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- ☐ New Well ☐ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SIOW
- ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
- ☐ OG ☐ GSW ☐ Temp. Abd.
- ☐ CM (Coal Bed Methane)
- ☐ Cathodic ☐ Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- ☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD
- ☐ Conv. to GSW
- ☐ Plug Back: _____ Plug Back Total Depth _____
- ☐ Commingled Permit #: _____
- ☐ Dual Completion Permit #: _____
- ☐ SWD Permit #: _____
- ☐ ENHR Permit #: _____
- ☐ GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

_____ Feet from ☐ North / ☐ South Line of Section

_____ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

☐ Letter of Confidentiality Received

Date: _____

☐ Confidential Release Date: _____

☐ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____

1136684

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No

Electric Log Submitted Electronically ☐ Yes ☐ No
(If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
Name Top Datum

CASING RECORD ☐ New ☐ Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Steffen OWWO 1
Doc ID	1136684

All Electric Logs Run

Geological Log
Compensated Density-Neutron Log
Dual Induction
Sector Bond-Gamma Ray Log



PAGE	CUST NO	INVOICE DATE
1 of 1	1000719	11/06/2012
INVOICE NUMBER 1718 - 91043913		

Pratt (620) 672-1201
B CHIEFTAIN OIL COMPANY
I PO Box: 124
L
L KIOWA
KS US 67070
T
O **ATTN:** ACCOUNTS PAYABLE

J	LEASE NAME	Steffen OWWO	1
O	LOCATION		
B	COUNTY	Hodgeman	
S	STATE	KS	
I	JOB DESCRIPTION	Cement-Casing	Seat-Prod W
T	JOB CONTACT		
E			

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40531267	19843			Net - 30 days	12/06/2012
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 11/03/2012 to 11/03/2012					
0040531267					
171807031A Cement-Casing Seat-Prod W 11/03/2012					
Cement 8 5/8" Squeeze					
Common Cemnet		300.00	EA	12.00	3,600.00 T
Calcium Chloride		564.00	EA	0.79	444.15 T
"Unit Mileage Chg (PU, cars one way)"		90.00	MI	3.19	286.88 T
Heavy Equipment Mileage		180.00	MI	5.25	945.00 T
"Proppant & Bulk Del. Chgs., per ton mil		1,269.00	EA	1.20	1,522.80 T
Depth Charge; 0-500'		1.00	EA	750.00	750.00 T
Blending & Mixing Service Charge		300.00	BAG	1.05	315.00 T
"Service Supervisor, first 8 hrs on loc.		1.00	EA	131.25	131.25 T
PLEASE REMIT TO:		SEND OTHER CORRESPONDENCE TO:		SUB TOTAL	7,995.08
BASIC ENERGY SERVICES,LP		BASIC ENERGY SERVICES,LP		TAX	595.63
PO BOX 841903		PO BOX 10460		INVOICE TOTAL	8,590.71
DALLAS,TX 75284-1903		MIDLAND,TX 79702			



BASIC
ENERGY SERVICES

PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 07031 A

DATE _____ TICKET NO. _____

DATE OF JOB 11-3-12		DISTRICT KANSAS		NEW WELL <input type="checkbox"/> OLD WELL <input checked="" type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:	
CUSTOMER Chieftain O.I.L Co. LLC		LEASE Steffen owned #1		WELL NO.:	
ADDRESS		COUNTY Hodgeman		STATE KS	
CITY		STATE		SERVICE CREW Allen Ed. Scott	
AUTHORIZED BY		JOB TYPE: 8 3/8" Sg.		CC SPW	
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS
28443 P 11	1/2				
19889-19843	1/2				
19831-19862	1/2				
TRUCK CALLED 11-3-12				DATE	AM/PM
ARRIVED AT JOB 11-3-12				DATE	AM/PM
START OPERATION 11-3-12				DATE	AM/PM
FINISH OPERATION 11-3-12				DATE	AM/PM
RELEASED 11-3-12				DATE	AM/PM
MILES FROM STATION TO WELL 90-miles					

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED:

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP100C	Common Cmt	SK	300		\$ 4800 00
CC109	calcium chloride	lb	564		\$ 592 00
F100	unit mileage chg. P.U.	mi	90		\$ 382 50
F101	Heavy Equip mileage	mi	180		\$ 1260 00
F113	Bulk Oil Chg.	tm	1269		\$ 2030 00
CF200	Depth chg. 0-500'	4-hr	1		\$ 1000 00
CE240	Blending & mixing service chg	SK	300		\$ 420 00
5003	Service Supervisor first 8hrs	EA	1		\$ 170 00

CHEMICAL / ACID DATA:

SUB TOTAL

\$7,992.50

SERVICE & EQUIPMENT

%TAX ON \$

MATERIALS

%TAX ON \$

TOTAL

SERVICE REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer Chieftain O.L. Co Inc		Lease No.		Date 11-3-12	
Lease Steffen ownd		Well # #1			
Field Order # 07031 A	Station Pratt	Casing 8-7/8	Depth 328' set	County Hodgeman	State Ks
Type Job 8-7/8 Sq.		Formation CCSPW		Legal Description 28-21-21	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8-7/8	Tubing Size	Shots/Ft 300		Acid COMMON	RATE 290 CC	PRESS	ISIP	
Depth 328'	Depth	From	To	Pre Pad	Max		5 Min.	
Volume 19	Volume	From	To	Pad	Min		10 Min.	
Max Press 500	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection swedge	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 300	Packer Depth	From	To	Flush Disp H2O	Gas Volume		Total Load	

Customer Representative				Station Manager Scotty				Treater Allen			
Service Units	28443	19889	19883	19831	19862						
Driver Names	Allen	Edmundo	Scott								

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
130pm					on loc. Discuss Safety Setup Plan Job
220				2	Start mix 300 sks common
250			64		w/ 20% CC
300				2	Finish mix
				1	Start Disp.
	100 #				Plug down
					Shut in @ well
					Release PSI 0#
					washup equip.
					Rackup equip.
400					Job Complete
					Cement CIR To P.L.
					thanks Allen
					Ed.
					Scott



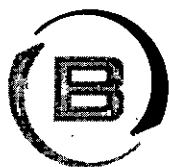
PAGE 1 of 2	CUST NO 1000719	INVOICE DATE 11/08/2012
INVOICE NUMBER 1718 - 91045832		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Steffen OWWO 1
 O LOCATION
 B COUNTY Hodgeman
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40532144	27463			Net - 30 days	12/08/2012
For Service Dates: 11/06/2012 to 11/06/2012		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
0040532144		NOV 09 2012 9304 BL			
171807317A Cement-New Well Casing/Pi 11/06/2012 Cement 5 1/2" Longstring					
AA2 Cement		150.00	EA	12.75	1,912.50 T
A-Con Blend Common		300.00	EA	13.50	4,050.00 T
60/40 POZ		50.00	EA	9.00	450.00 T
C-41P		29.00	EA	3.00	87.00 T
Celluloflake		75.00	EA	2.78	208.13 T
Calcium Chloride		846.00	EA	0.79	666.22 T
Salt		743.00	EA	0.38	278.63 T
Mud Flush		500.00	EA	0.65	322.50 T
Super Flush II		500.00	EA	1.15	573.75 T
C-44		141.00	EA	3.86	544.61 T
Gilsonite		750.00	EA	0.50	376.88 T
"Two Stage Cement Collar, 5 1/2" (Red)"		1.00	EA	4,574.99	4,574.99
"5 1/2" Latch Down Plug & Assembly (Red)		1.00	EA	637.50	637.50
"Auto Fill Float Shoe 5 1/2" (Blue)"		1.00	EA	270.00	270.00
"Turbolizer, 5 1/2" (Blue)"		5.00	EA	82.50	412.50
"5 1/2" Basket (Blue)"		1.00	EA	217.50	217.50
"Unit Mileage Chg (PU, cars one way)"		90.00	MI	3.19	286.88
Heavy Equipment Mileage		270.00	MI	5.25	1,417.50
"Proppant & Bulk Del. Chgs., per ton mil		2,097.00	EA	1.20	2,516.40
Depth Charge; 1001'-2000'		1.00	EA	1,125.00	1,125.00
Depth Charge; 4001'-5000'		1.00	EA	1,890.00	1,890.00
Blending & Mixing Service Charge		500.00	BAG	1.05	525.00
High Head Charge (Over 6')		1.00	EA	225.00	225.00
"Service Supervisor, first 8 hrs on loc."		1.00	EA	131.25	131.25

25,088²⁵



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 07317 A

DATE _____ TICKET NO. _____

DATE OF JOB 11-6-12 DISTRICT Pratt				NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:			
CUSTOMER Chieftain Oil				LEASE Steffen OWWO WELL NO. 1			
ADDRESS				COUNTY Hodgeman STATE KS			
CITY _____ STATE _____				SERVICE CREW Orlando, McBrew, Pearson, Phye			
AUTHORIZED BY _____				JOB TYPE: CNW - 5 1/2 L.S. Wash Down			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 11-6-12 TIME 2:00
27283	2					ARRIVED AT JOB	5:00
27463	2					START OPERATION	1:00
19831-19862	2					FINISH OPERATION	3:00
70959-19918	2					RELEASED	4:00
						MILES FROM STATION TO WELL	90

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED:
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA2 Cement	SK	150		2550.00
CP101	A-Con Blance	SK	300		5400.00
CP103	60/410 P-2	SK	50		600.00
CC105	C-44 P Dalcamer	LB	29		116.00
CC111	Salt	LB	743		371.50
CC115	C-44	LB	141		726.15
CC129	FLA-322	LB	113		847.50
CC201	Gilsonite	LB	750		502.50
CC102	Cellulose	LB	75		277.50
CC109	Calcium Chloride	LB	846		888.30
CH01	Two Stage Cement Collar 5 1/2 (Red)	ea	1		6100.00
CF601	Latch Down Plug + Baffle 5 1/2 (Red)	ea	1		850.00
CF125	AutoFill Sealant Shoe 5 1/2 (Blue)	ea	1		360.00
CF165	Tri-Bohizer 5 1/2 (Blue)	ea	5		550.00
CF190	Basket 5 1/2 (Blue)	ea	1		290.00
CC151	Mud Flush	gal	500		430.00
CC155	Super Flush	gal	500		765.00

SUB TOTAL **24335.36**

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$

TOTAL

SERVICE REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



**10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201**

~~1718~~ ~~SECRET~~ ~~A~~

Continuation of
DATE TICKET NO. 171807317

DATE OF JOB 11-6-12 DISTRICT Platt				NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:			
CUSTOMER Chieftain Oil				LEASE Steffen Owwwo WELL NO. 1			
ADDRESS				COUNTY Hodgeman STATE KS			
CITY STATE				SERVICE CREW Orlando, Melvin, Phil, Pearson			
AUTHORIZED BY				JOB TYPE:			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 11-6-12 AM/PM 2:00
27283	2					ARRIVED AT JOB	AM/PM 2:50
27463	2					START OPERATION	AM/PM 10:00
19831-19862	2					FINISH OPERATION	AM/PM 3:00
77059-19918	2					RELEASED	AM/PM 4:00
						MILES FROM STATION TO WELL	90

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

[illegible]

CHEMICAL / ACID DATA:			

		SUB TOTAL	24335.36
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			

SERVICE REPRESENTATIVE <i>Steve H. H.</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>K. M.</i>
-------------------------------------------	----------------------------------------------------------------------------------

FIELD SERVICE ORDER NO.



Customer		Lease No.		Date	
Lease		Well #			
Field Order #	Station	Casing	Depth	County	State
Type Job			Formation	Legal Description	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

[illegible][illegible]



Customer <u>Chattain Gil</u>		Lease No.		Date <u>11-6-13</u>	
Lease <u>Stallan</u>		Well #			
Field Order.# <u>9315</u>	Station <u>P. at 1</u>	Casing <u>5 1/4</u>	Depth	County <u>Hodgeman</u>	State <u>Ks</u>
Type Job <u>CNW OWWO</u>			Formation	Legal Description <u>28-21-21</u>	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid. 3005H. Acid	RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush 32.8	Gas Volume		Total Load

Customer Representative	Ron Mulz	Station Manager	Dave Scott	Treater	Steve Cline
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Service Units	37783	377163	19831	19861	77651	19718					
Driver Names	William McBrat		Pioneer		PHYLE						

[illegible]

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

April 29, 2013

Ron Molz
Chieftain Oil Co., Inc.
101 S. 5TH ST.
PO BOX 124
KIOWA, KS 67070-1912

Re: ACO1
API 15-083-20613-00-01
Steffen OWWO 1
NW/4 Sec.28-21S-21W
Hodgeman County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Ron Molz

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

April 30, 2013

Ron Molz
Chieftain Oil Co., Inc.
101 S. 5TH ST.
PO BOX 124
KIOWA, KS 67070-1912

Re: ACO-1
API 15-083-20613-00-01
Steffen OWWO 1
NW/4 Sec.28-21S-21W
Hodgeman County, Kansas

Dear Ron Molz:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/01/2012 and the ACO-1 was received on April 29, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department